Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

		CLAIMS A	S FILED - (Column		-	(Column 2)		SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS				20		(Coldini 2)			FEE	OR 1 I		
FOR					NU IVAG	SD SVIDA		ATE			RATE	FEE
			NUMBER FILED		NUMBER EXTRA		DAS	TO FEE	375.00	OR	BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS			20 minus 20=		* ~		X	\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			<u></u>				×	42=		OR	X84=	
MU	LTIPLE DEPEN	IDENT CLAIM P					+1	40=		OR	+280=	
* If	the difference	in column 1 is	less than ze	ero, enter	"0" in c	" in column 2		TAL		OR	TOTAL	160
	С	LAIMS AS A	MENDED - PART II				•				OTHER	
_	Ries with Sentence	(Column 1)	harries april maries de commune an a	(Column HIGHES		(Column 3) S		SMALL ENTITY		OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X	§ 9=		OR	X\$18=	
	Independent	*	Minus *** JLTIPLE DEPENDENT		CL AIM	= [-]	X	42=		OR	X84=	
L	THOI FRESE	INTATION OF W	OLTIPLE DEI	PENDENT	CLANVI		+1	40=		OR	+280=	
			TOTAL T. FEE		OR	TOTAL ADDIT. FEE						
		(Column 1)	المال	1.1-661			ADDIT. I CE					
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X	9=	1	OR	X\$18=	
	Independent	*	Minus	***		=	X	42=		OR	X84=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM										000	
										OR	+280=	
								TOTAL T. FEE		OR	TOTAL ADDIT. FEE	
	E-w/- #60 7 00 7 00 7 00 7 00 7 00 7 00 7 00	(Column 1)	T	(Colur		(Column 3)						
AMENDMENT C		REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA	R/	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X	S 9=		OR	X\$18=	
	Independent	*	Minus	***		=	X	12=			X84=	
	FIRST PRESE	NTATION OF M	ULTIPLE DEI	PENDENT	CLAIM		<u> </u>			OR	7.0.	
*	If the entry in colu		40=		OR	+280=						
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
	The "Highest Nun	mber Previously Pa nber Previously Pa	aid For IN IH iid For" (Total o	r Independ	is iess tha ent) is the	ា 3, enter "3." highest number			oropriate box	c in co	lumn 1.	